



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

2/p  
SK  
12-22-03

Applicant(s): Toombs et al.  
Title: Voltage Negotiation in a Single Host Multiple Cards System  
Application No.: 09/829,146 Filing Date: April 9, 2001  
Examiner: Kim, Hong Chong Group Art Unit: 2186  
Docket No.: SNDK.099US1 Conf. No.: 1045

Certificate of Mailing Under 37 CFR 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope address to:  
Commissioner for Patents, Washington, D.C. 20231, on 12/9/03

William Bowen  
Signature

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DEC 17 2003

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Technology Center 2100

AMENDMENT

Dear Sir:

The following is responsive to the Official Action mailed on September 18, 2003.  
Applicant responds to the Official Action as follows:

**Amendments to the Claims** are reflected in the listing of claims that begins on page 2 of this paper.

**Remarks** begin on page 4 of this paper.

2186



# PARSONS HSUE & DE RUNTZ LLP

655 MONTGOMERY STREET, SUITE 1800 ♦ SAN FRANCISCO, CALIFORNIA 94111

Telephone: (415) 318-1160 ♦ Fax: (415) 693-0194

December 9, 2003

Commissioner For Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Re: Applicant(s): Toombs et al.  
Title: Voltage Negotiation in a Single Host Multiple Cards System  
Application No.: 09/829,146 Filing Date: April 9, 2001  
Examiner: Kim, Hong Chong Group Art Unit: 2186  
Docket No.: SNDK.099US1 Conf. No.: 1045

Dear Sir:

Transmitted herewith are the following documents in the above-identified application:

- (1) Return Receipt Postcard;
- (2) This Transmittal Letter (in duplicate);
- (3) Amendment (5 pages); and
- (4) Declaration of Thomas N. Toombs (2 pages).

- ☒ No additional fee is required.  
☐ The fee has been calculated as shown below:

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## CLAIMS AS AMENDED

	Claims Remaining <u>After Amendment</u>		Highest No. Previously <u>Paid For</u>		Present <u>Extra</u>		<u>Rate</u>		<u>Additional Fee</u>	
Total Claims	10	Minus	20	=	0	x	\$18.00	\$		0.00
Independent Claims	2	Minus	3	=	0	x	\$86.00	\$		0.00
<input type="checkbox"/>	Fee of ____ for the first filing of one or more multiple dependent claims per application							\$		
<input type="checkbox"/>	Fee for Petition for Extension of Time							\$		
<b><u>Total additional fee for this Amendment:</u></b>								\$		<u>0.00</u>
<input checked="" type="checkbox"/>	Conditional Petition for Extension of Time: If an extension of time is required for timely filing of the enclosed document(s) after all papers filed with this transmittal have been considered, an extension of time is hereby requested.									
<input checked="" type="checkbox"/>	Please charge any additional fees required and credit any overpayment to our Deposit Account No. 502664.									
<b>Total:</b>								\$		<u>0.00</u>

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Galeen Bower  
Signature

Respectfully submitted,

Gerald P. Parsons  
Gerald P. Parsons  
Reg. No. 24,486